Opening Doors to Innovation: Reducing Barriers to Services

August 20, 2013, 3:00pm – 4:15pm ET







Today's Webinar



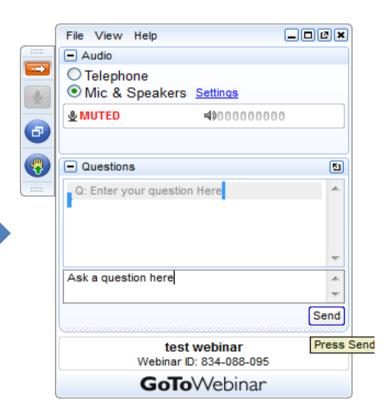
- Slides and a recording will be posted after the webinar
- We have reserved time at the end for Q&A
- Due to the high number of participants, you are in "listen only mode"
- Today's webinar is being recorded and will be posted on www.usich.gov



Questions?



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Webinar Purpose



To provide information on how Grant and Per Diem and other programs can adapt their policies, procedures and practices to reduce barriers that homeless Veterans may encounter when accessing services.

Transitional Housing programs can incorporate Housing First into their programs by:

- Providing low-barrier admission
- Delivering housing-focused services
- Helping residents transition to appropriate housing quickly



Panelists



- Barbara Poppe, Executive Director, U.S.
 Interagency Council on Homelessness
- Jeffrey Quarles, National Director, Grant and Per Diem, U.S. Department of Veterans Affairs
- Baylee Crone, Vice President of Operations and Programs, National Coalition for Homeless Veterans
- Daleena Scott, Project Manager, Volunteers of America – Colorado Branch
- Eric Grumdahl, Policy Director, U.S. Interagency Council on Homelessness



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Reducing Barriers to Services

Jeffery L. Quarles MRC, LICDC

Director,

GPD National Program Office

Barriers to Services

- Lowering barriers (demand) to transitional housing services can increase Veteran participation
- Two types of barrier for today's discussion
 - Barriers to service entry
 - Admission criteria (i.e. requiring treatment prior to acceptance)
 - Opportunities with lowering barriers
 - Increased accessibility to transitional housing/increased occupancy
 - Rapid stabilization-reducing street homeless population

Barriers to Services

- Barriers to continued stay/program design
 - Program driven lengths of stay, required program phases
 - Program goals vs. Individualized goals
 - Opportunities available from lowering programmatic barriers
 - Improved rates of service completion (less rule violation exits)
 - Can lead to increased permanent housing outcomes
 - Shorten lengths of stay/rapid stabilization, rapid re-housing

Considerations with Change

- Implementing change
 - Internal review of potential barriers to services
 - Review data-what is it telling you?
 - Feedback from staff, Veterans and VA (identify opportunities and concerns)
 - Indentify training needs and implement
 - Coordinating with Iocal VAMC for medical/MH/SUD support
 - Who do we need to convey changes to and how?
 - Considerations about how relapses will be handled
 - GPD regulation relating to sober environment

Clean and Sober Living Environment

- 61.80(14) Residents must be provided a clean and sober environment that is free from illicit drug use or from alcohol use that:
 - could threaten the health and/or safety of the residents or staff;
 - hinders the peaceful enjoyment of the premises; or
 - jeopardizes completion of the grantee's project goals and objectives.

Clean and Sober Environment-What does this mean?

- Does this mean that Veterans cannot be admitted to GPD if they have not previously had a period of sobriety or treatment?
 - No there is no prior sobriety requirement and/or treatment requirement to enter GPD transitional housing

Clean and Sober Environment-What does this mean?

- Does this mean that a Veteran must be discharged if they relapse while in GPD?
 - No, there is no requirement to discharge a Veteran if they relapse.
 - Opportunities to engage Veteran without discharge (meet Veteran where they are)
 - Use of Motivational Interviewing
 - GPD webinar
- Are you saying it is ok for Veterans to drink or use on the within the facility?
 - No, we are encouraging the engagement of the Veteran at their current level of motivation to meet their individual goals

Program Changes

- What do we do when we are ready to make a changes in our program?
 - Significant changes in grant activities, including changes in the project plan, activities and/or populations served require approval from the GPD National Office
 - Such a request would be considered a Change of Scope

Change of Scope

- Change of Scope request submitted through the VA GPD liaison to the GPD Office
 - Should be on the letterhead of the organization
 - Describe current situation and the proposed change
 - Should detail purpose of the change
- GPD Office responds in writing to the request within 30 days.

Final Thoughts

- Consider opportunities to lower barriers that may exist within your program
- If you are considering changes of scope, consult with your GPD Liaison
- The GPD Office is also available for technical assistance regarding the change of scope process



Baylee Crone
Vice President of Operations and Programs

The Role of GPD in Housing First

- Housing placement that is both permanent and stable meets basic needs: survival, safety, and security
- Transitional housing serves as an access point and conduit for this long-term security
- Through low barriers to entry and reduced barriers during service delivery, GPD can expedite entry and shortens the process of placement in permanent housing

Limiting Assumptions

 Success in permanent housing is predicted by success in transitional housing

 Homeless veterans must be (and stay) fully clean and sober before they enter housing

Counselors should set goals for veterans

"Client choice" means "absolute choice"

Opportunities and Overlaps

• Principles:

- Harm reduction over abstinence
- Reciprocal commitment
- Buy-in through rapport building
- Consumer choice and self-determination

Activities:

- Provider takes responsibility for follow-up on service needs
- Service options support skill-building and empowerment
- Separation between housing and services
- Using "interim housing" as opportunity to address basic needs

VOLUNTEERS OF AMERICA

Transitional Housing for Women Veterans

Project Manager-Daleena Scott

we feed, we shelter, we support.



REDUCING BARRIERS AT ENTRY

- Referrals come directly from VA
 - Walk-in Clinic
 - VA Hospital
 - CRRC-Community Resource and Referral Center
 - Assessment for program is done by VA, veteran is given paperwork, speaks with VOA staff and brought into our location
- What happens when a veteran doesn't want to access VA services?



REDUCING BARRIERS AT ENTRY

- Accept every female veteran that is referred
 - Single
 - Women with children
 - Transgender
- Veteran doesn't need to be sober for entry
 - Previous treatment not required
 - Meet veteran where they are in their sobriety
 - Work to connect veteran with treatment after entry

Volunteers

we care

REDUCING BARRIERS DURING SERVICE

- Role of Veteran Advocate (Case Manager)
 - Veteran sets initial goal plan with Veteran Advocate and together both parties continue to review and reassess when necessary
 - Goals and how the goals are attained are veterans choice, keeping in mind that housing is the ultimate goal
 - Create environment of encouragement for veteran with help of motivational interviewing
 - Coordinate appointments with Veteran Liaison as well as any other individuals involved in treatment plan

REDUCING BARRIERS DURING SERVICE

- Encouraging Veteran to participate in services that are critical to housing stability
- Beginning connection to services and permanent housing happens immediately
 - No predetermined phases
- Connect with other community based services
 - Financial advisement
 - Program fees-returned to veteran at completion of program, adjusted as needed as situations arise
 - Monthly budgeting
 - Financial classes
 - Employment
 - Compensated Work Therapy (CWT)
 - Homeless Veteran Reintegration Program (HVRP)
 - Employment labs
 - Housing
 - SSVF
 - Affordable Housing
 - HUD-VASH

we feed, we shelter, we support.



REDUCING BARRIERS DURING SERVICE

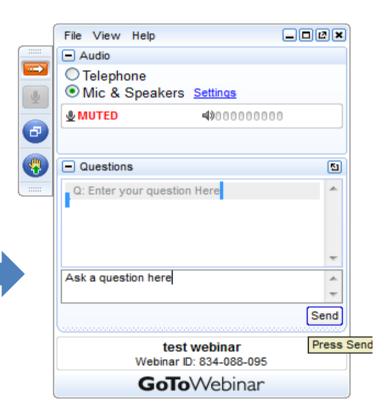
- Rule Violations Non-Critical
 - Relapse
 - Not a reason for discharge
 - Connecting Veteran to treatment
 - Shelter Violations
 - Not doing chores
 - Personality/roommate issues
- Address matters with veteran right away-there may be a bigger issue
- Ensure responsibility of both parties is understood
- Promote healthy boundaries and living situations
- Revisit plan and goals







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Resources

immediate access to permanent affordable or supportive housing. Without clinical prerequisites li of a course of treatment or evidence of sobriety and with a low-threshold for entry, Housing First y





www.usich.gov/usich_resources



VA's National Call Center for Homeless Veterans



Are You or a Veteran You Know At Risk of Homelessness?

- Are you currently living with someone because you can't afford to rent or own a home of your own?
- Have you had trouble finding or holding a job?
- Do you have a physical or mental condition that makes it difficult to keep a steady job?
- Do employers say you don't have the skills or education they are looking for?
- Are you struggling with an alcohol or substance use problem?
- Have service-related injuries made returning to civilian life difficult?

If you answered yes to any of the questions listed, or are simply feeling worried about your housing situation or that of a Veteran you know, VA can help.

You fought for our homes.





We'll fight for yours.

We're Here for You.

Whether you are in need of immediate assistance, just looking for more information, or interested in finding out how you can help eliminate Veteran homelessness — VA is here for you. Our trained professionals, many of whom are Veterans themselves, are available 24 hours a day, 7 days a week:

National Call Center for Homeless Veterans

TOLL-FREE 1-877-424-3838 (1-877-4AID-VET)

Live 24/7 Chat on VA's Homeless Veterans website, www.va.gov/homeless







Created 09/11

The words homeless and Veteran should never be used together.

Make the Call!

Call VA's toll-free hotline:

1-877-424-3838

(1-877-4AID-VET)

or visit www.va.gov/homeless for help with housing, jobs, health care, education and other Veteran benefits.







Stay Connected



31



No one should experience homelessness. No one should be without a safe, stable place to call home.

Ending Veteran Homelessness

Pushing to the Goal: 3 Ways to Accelerate Ending Veteran Homelessness

With less than 1,000 days until the 2015 goal, here are three important ways to accelerate progress

The Administration's commitment to end homelessness among Veterans and their families remains steadfast. The President's FY 2014 budget proposal continues to increase investment in effective strategies including \$75 million for the HUD-Veterans Affairs Supportive Housing (HUD-VASH) program and \$300 million for Department of Veterans Affairs (VA) Supportive Services for Veteran Families (SSVF) program. The Administration's previous investments in ending Veteran homelessness continue to show significant results: homelessness among Veterans is down 18 percent since the launch of Opening Doors.

During the April 16 meeting of the U.S. Interagency Council on Homelessness, along with representation from the White House's Domestic Policy Council and Office of Management and Budget, Council leadership reviewed progress at ending Veterans homelessness, recognizing that even with the progress to date, efforts must be accelerated to meet the goal of ending Veterans homelessness by 2015. Ending Veterans homelessness remains possible with the right investments focused in

Table of Contents

3 Ways to Accelerate Ending Veteran Homelessness

Breaking Down Legal Barriers to Housing

April 25, 2013

HUD-VASH Makes Housing First a Priority

Successful Program Model: Washington State's SOAR Program

Project REACH Winner

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"Opening Doors to Innovation: Improving Client Outcomes Using Housing First"

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